

Testimony of  
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The Millennium Water Alliance  
House Committee on International Relations  
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Chairman Hyde and distinguished members of the House Committee on International Relations, thank you for inviting me to testify before you today on H.R. 1973, the “Water for the Poor Act of 2005”.

First I commend Congressman Blumenauer for introducing this vital legislation which well lays out both the problem and the need for clear action.

I am Chairman of a Fortune 1000 company who was privileged to discover first hand the need for clean water on a trip to Africa in 1990 which led to the founding of Living Water International. Later, the Millennium Water Alliance was launched just after the World Summit on Sustainable Development in 2002. It brought together in collaboration for the first time, U.S. 501 C-3 organizations that were totally devoted to providing water or had large components providing water to developing countries. I am attaching a brief history of the Millennium Water Alliance.

My testimony will focus on Ethiopia for brevity but my comments are translatable to many countries. 70% or 42 million people in Ethiopia lack access to clean drinking water. Just drinking water is the greatest need. The provision of sanitation is critical and boosts the health benefits of clean water. Once water and sanitation are provided it is critical to break past habits and teach people to utilize these new interventions.

Let's focus on a plan that works. First, emphasis is on rural water and sanitation. Rural areas are most lacking in access to clean water all over Africa.

A Secretariat is first formed in the country consisting of a manager and a financial officer. The Secretariat draws interested parties together from member organizations, US AID, UNICEF, Country water ministries and even local water NGO's. Standards for water quality, types of pumps, and applicable regulations are established. The Secretariat oversees collection of information on finances and service levels and provides a single source of information to governments and funding agencies.

The Secretariat holds partner meetings at water projects sites to induce constructive criticism, knowledge sharing and development of best practices among the providers of water and sanitation.

The World Bank has designated funds for Ethiopia but the country itself does not have the capacity to appropriately deploy the money for water development.

The MWA works at the community level with local officials. A community water board of men and women is created to oversee the community's water needs. The MWA then works with local officials and board to ascertain what system is appropriate to meet their needs. Available options are discussed including the expense of operating a facility. Once a solution is selected, the MWA works with community members who provide great participation in its implementation.

Each implementing team includes extra members to apprentice with the goal of being able to split teams and double production capacity within one year. Systems are open to inspection and other teams are welcome to study for purposes of replication. With this model starting out with only \$ 1.5 million in the first year and doubling expenditure and capacity only once each year, water, sanitation and health and hygiene training can be extended to virtually every citizen within a ten year time. The total cost for Ethiopia in today's dollars, approximately \$1.68 Billion.

The MWA is committed to training the local population to create capacity in water and sanitation, health and hygiene. In the process, indigenous population will have been trained in bookkeeping, teaching and trade skills which will allow them to turn their expertise gained into ongoing business skills to continue maintenance and the development of more advanced water systems.

If those countries being granted debt relief would agree to spend all such former debt payments on providing clean water, I believe those countries would each be able to supply water and sanitation to all their communities within a decade. This is using a model of efficient implementation as described with guidance like the MWA provides.

As a businessman, I understand the many competing needs leaders are faced with. However, if no provision is first made for clean water, I predict no country will rise out of its poverty and will always be an international burden. Without clean water, those countries will be back at a future G8 table with the same request for debt relief once again. Faced with 50% of the hospital beds of the world filled because of water related disease, 80% of premature death and sickness from bad water and huge losses of labor hours, we have a silent tsunami that buries any potential for economic development. As a humane society we want to throw every thing we have at treating the illnesses. However, we must instead vaccinate against the illness. That vaccination is clean water.

Peter Agre of Johns Hopkins received the Nobel Prize for Chemistry in 2003 for the discovery that every single cell of the human body contains a channel through which only one thing can pass and that is water. Water channels are key to such crucial activities as making the heart beat, the brain function and the limbs move. With 100 trillion cells in your body, there are one hundred trillion ways to get sick without clean water.

Dr. Richard L. Garrison, Professor, University of Texas-Houston, Health Science, Department of Family Practice and Country Medicine has written a plan on a universal coverage health system. From that, I quote: "By any account, the first, most effective implementation would be the provision of pure drinking water. Therefore, LEVEL ONE of the vertically integrated healing arts is the provision of pure drinking water. This must include every individual universally, because disease in a society can radiate out from any contaminated focus. Every citizen must be made fully aware of the preciousness of this resource so that they will guard their right and their responsibility.

Most people would not consider drinking water issues to be the business of the physician. However, everyone would admit upon reflection that the things considered by most folk to be appropriate to the physician are not nearly as effective at preventing or treating disease as is the provision of pure drinking water. Therefore, if drinking water is not an issue for the health system, then it must be conceded that other systems have more impact on health than does the health system. This ought not to be! Therefore, the vertically integrated healing arts should start at the drinking water level." I will be happy to provide a full copy of this paper.

Adequate supplies of clean water provide a huge benefit for the whole global community as well. The SARS epidemic spread due to lack of adequate quantities of water for simple hand washing. HIV/Aids patients cannot be successfully treated without access to clean water and their caregivers are exposed as well. In the Central African Republic, there is an outbreak of a new disease called Hepatitis E. This disease is being spread through the water and has reached Chad and into Darfur.

I fully encourage the passage of H.R. 1973. We must quit spending dollars to fix recurrent problems and not addressing the root cause. It is much less costly to address the problem and fix it. Not one member of Congress would be reelected if members of their district were told that there were better things to spend money on than clean water on if their constituents did not have access to clean water. The people are no different in other countries which we let languish without clean water, unable to develop and staying in squalor and forever therefore dependent on us. The Water for the Poor Act will make it a major objective of united States foreign assistance to promote good health, economic development, poverty reduction, women's empowerment and environmental sustainability by providing assistance to expand access to safe water and sanitation and improving hygiene for people around the world.